City of Covington Parks and Recreation

Official Roster

	Coaches Name:	
Type or print all items except significant	natures. This roster will be not accepted unless filled out completely and legibly w	vith first and last names listed



Original signatures acknowledge having read and agree to the hold harmless terms below. Player's Name Gender Signature Required T-Shirt Size Address Phone # Email M/F Please print first and last name Ex: John Doe 123 SE 1st St, Covington, 98042 253-123-4567 John Doe M idoe@gmail.com 1 Coach 3 4 5 6 7 8 9 10 11

Covington Parks and Recreation Release and Hold Harmless Agreement: In the absence of a signature, registration for the program, payment of fees and/or participation in the program(s) or activity(ies) shall constitute acceptance of the conditions set forth in this release. I agree to indemnify, release and hold harmless the City of Covington, all of its officers, agents, volunteers and employees, from any and all liability for injuries, claims, costs, loss or damage to persons (including death) or property, that result from, arise out of or are in any way, directly or indirectly, connected with the use of City of Covington owned or operated facilities, City of Covington sponsored events or programs or that may be the result of or related in any way to any negligence or other acts or omissions of the City of Covington, its officers, agents, employees or volunteers. I grant full permission to use any photographs, video tapes or any other record of this program for any City of Covington informational or promotional use. I am agreeing to these terms on behalf of, and they are binding on myself, my family and my heirs, beneficiaries, personal

This completed roster must be returned to: Covington Parks & Recreation Office Covington City Hall Attn: Sean Conway 16720 SE 271st Street, Suite 100 Covington, WA 98042 253-480-2499

Please do not mail cash. Checks payable to **City of Covington**